

City of Rochester

30 Church Street, Room 103A, Rochester, NY 14614

SUMMER RECREATION EMPLOYMENT APPLICATION

Return application to above address

ARE YOU CURRENTLY IN HIGH SCHOOL Yes No													
IF YES, STOP. ALL High School Students MUST complete a Good Grades Pay Application instead of this application.													
Check All Th	e Pos	sitions You Are	Applying F	or: (yo	u must	meet minim	um requir	ements)					
☐ Day Camp Supervisor		sor \square Po	☐ Pool Attendant			Youth Worker							
☐ Playground S	Superv	isor \square Re	creation Assis	tant									
			First	N	Л.І.	Telephone # _							
Address:N	0.	Street	(City		State	Zip						
Mailing Address: (If different than	: above)):											
Date of Birth:				Social Sec	urity #:								
Work Permit?	YES [□ NO □ Req	uired if under	18 years o	ld.								
Have you bee	en co	nvicted of a vic	olation of la	ıw? Y	′ES □	νο □							
<u>If yes,</u>	attac	ch sheet with vio	lations and	dates.									
for a	violatio	l <u>ude:</u> Parking violati on or crime for whicl will not necessarily	n you have rec	eived adio	urnment	n records seale in contemplatio	d by court, or on of dismissa	records al(ACD).					
Photo Copy	y (fro	nt & back) of	ALL Certi	ficates	and A	ttach them	to this A	Application					
Do You Have:		CPR/Professional F		NO \square	YES _	· -							
		First Aid/Standard?		NO \square	YES L	· -							
	3.	Responding to Eme	ergencies?	NO \square	YES L	Expires _							

Required Certifications **must** remain current and up-to-date for entire length of employment. If any of your certifications expire, you MUST take the proper instruction to keep it current. Failure to do so will result in **TERMINATION**.

ALL APPLICANTS MUST COMPLETE THIS SIDE: EDUCATION

Have you Graduated High Scl	hool or Obtained a GE	D: YES □	-or if- NO	$oldsymbol{ol{oldsymbol{ol}oldsymbol{oldsymbol{oldsymbol{oldsymbol{ol}oldsymbol{oldsymbol{oldsymbol{ol}}}}}}}}}}}}}}}}}$	
<u>Name</u>	,	.& yr) <u>om/To</u>	<u>Major</u>	Highest (Grade/Degree
College					
Are you related to a City of Roll foo, in what department doe			YES 🗆	NO 🗆	
WORK EXPERIENCE					
Have you ever worked for the	City of Rochester? YE	ES ∐ NO	☐ -if yes-Whe		
Work Location: Duties:		Supervisor:			no/yr)
List any previous job experi	ence:				
1. Employer: Address:		Fr	om: Mo/Yr	Title: To: Mo/Yr	Hrs/Wk: _
Duties:					
Reason for Leaving:	Supervis	or:		Telephone Number	:
2. Employer: Address:		Fr	om: Mo/Yr	Title: To: Mo/Yr	Hrs/Wk:
Duties:					_
Reason for Leaving:				Telephone Number	
I DECLARE THAT ALL ECOMPLETE TO THE BESTATEMENTS MADE OF RESULT IN IMMEDIATE Signature:	EST OF MY KNOW ON THIS APPLICATE EREJECTION OR	/LEDGE. I TION OR I DISCHAR	UNDERSTA N SUBSEQU GE.	AND THAT ANY I JENT INTERVIEV	FALSE
DO NOT WRITE BELOW TH	IS LINE (FOR OFFICE	USE ONLY))		
======================================					
☐ Day Camp Supervisor	☐ Pool Attendant		☐ Youth Work	ker	
	☐ Recreation Assis	stant	-		
Comments:					
Initials and Date:					